

CJA 10 APPOINTMENT OF AND AUTHORITY TO PAY COURT APPOINTED COUNSEL

1. CIR./DIST./DIV. CODE PAM		2. PERSON REPRESENTED Yocum, Chelsea L.		VOUCHER NUMBER																																																																																																																																																																										
3. MAG. DKT./DEF. NUMBER		4. DIST. DKT./DEF. NUMBER 1:01-000072-001		5. APPEALS DKT./DEF. NUMBER																																																																																																																																																																										
7. IN CASE/MATTER OF (Case Name) U.S. v. Yocum		8. PAYMENT CATEGORY Felony		9. TYPE PERSON REPRESENTED Adult Defendant																																																																																																																																																																										
10. REPRESENTATION TYPE (See Instructions) Other																																																																																																																																																																														
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense. 1) 18 924C.F - VIOLENT CRIME/DRUGS/MACHINE GUN																																																																																																																																																																														
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS LORD, GERALD A. 139 E. PHILA. ST. YORK PA 17403 Telephone Number: MAY 13 2005			13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subst. For Federal Defender <input type="checkbox"/> R Subst. For Retained Attorney <input type="checkbox"/> P Subst. For Panel Attorney <input type="checkbox"/> Y Standby Counsel Prior Attorney's Name: _____ Appointment Date: _____ <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, or <input type="checkbox"/> Other (See Instructions) _____ Signature of Presiding Judicial Officer or By Order of the Court Date of Order: 05/11/2005 Payment or partial payment ordered from the person represented for this service at time of appointment: <input type="checkbox"/> YES <input type="checkbox"/> NO																																																																																																																																																																											
14. NAME AND MAILING ADDRESS OF LAW FIRM (only provide per instructions) MARY E. D'ANDREA, CLERK Per _____																																																																																																																																																																														
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